

Express Mail No. EV336670181US

**PATENT****IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

RE APPLICATION OF: VLADIMIR VICTOROVICH  
SCHIPUNOV ET AL.  
APPLICATION No.: 09/702,004  
FILED: 10/30/2000  
FOR: TARGETING ELECTRONIC ADVERTISING  
PLACEMENT IN ACCORDANCE WITH AN  
ANALYSIS OF USER INCLINATION AND  
AFFINITY

EXAMINER: DANIEL LASTRA  
ART UNIT: 3622  
CONF. NO: 7812

**RECEIVED**

AUG 4 - 2004

**GROUP 3600****Amendment Under 37 C.F.R. § 1.111**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

The present communication responds to the Office Action dated March 30, 2004, in the above-identified application. Please amend the application as follows:

Amendments to the Claims are reflected in the listing of claims beginning on page 2.

07-30-04

3632 \$

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AMENDMENT TRANSMITTAL LETTER				Docket No. 291508006US1	
Application No. 09/702,004-Conf. #7812	Filing Date October 30, 2000	Examiner Daniel Lastra		Art Unit 3622	
Applicant(s): Vladimir Victorovich Schipunov et al.					
Invention: TARGETING ELECTRONIC ADVERTISING PLACEMENT IN ACCORDANCE WITH AN ANALYSIS OF USER INCLINATION AND AFFINITY					
<b>RECEIVED</b>					
AUG 4 - 2004					
<b>GROUP 3600</b>					
<b>CLAIMS AS AMENDED</b>					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	51	- 37 =	14	x 9.00	126.00
Independent Claims	11	- 11 =	0	x 0	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): Extension for response within first month 55.00					
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b> 181.00					
<input type="checkbox"/> Large Entity			<input checked="" type="checkbox"/> Small Entity		
<input type="checkbox"/> No additional fee is required for this amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> A check in the amount of \$ 181.00 to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. 50-0665 as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
<p>_____ Steven D. Lawfenz Attorney Reg. No.: 37,376</p> <p>Dated: 7/29/04</p>					
<p>PERKINS COIE LLP P.O. Box 1247 Seattle, Washington 98111-1247 (206) 359-8000</p>					